



BROTHER, YOU'RE ON MY MIND

Fact Sheet on Depression and Stress in Younger African American Men

The college years and young adulthood can be tough and full of stressful situations. We might be living away from home for the first time, missing family and friends, and feeling alone in a new place. We might be in charge of our own food, clothing, shelter, and sleep schedules for the first time—and not always managing so well. We might be encountering new and difficult academic work and jobs. We might be having relationship problems or breakups. A lot of us are worried about finances. Our encounters with racism and discrimination in daily life add to our burdens. Sometimes there are a lot more problems than pleasures.

All of these stresses can leave us exhausted, irritable, or sad. If these “blues” last more than a few weeks or make it hard to carry on with daily life, you may be depressed. Depression is one of the most common mental health problems, but it often goes unnoticed and untreated among young African American men. We're expected to be strong in a crisis, hide our sensitivities, and keep personal problems within the family. And a nationwide survey found that about 30 percent of college students reported feeling “so

depressed that it was difficult to function” at some time in the past year.

The good news is that depression, like other illnesses, is treatable, and we can recover.

PHYSICAL AND EMOTIONAL SIGNS

Depression symptoms can be different for each person. Someone with depression may feel sad, anxious, empty, hopeless, guilty, worthless, helpless, tired, irritable, or restless. Other potential symptoms of depression include:

- Ω Aches, pains, headaches, cramps, or digestive problems
- Ω Loss of interest in activities that one used to enjoy, including sex
- Ω Problems concentrating, remembering information, or making decisions
- Ω Problems falling or staying asleep, or sleeping too much

Ω Eating too much or not wanting to eat at all

Ω Thinking about or attempting suicide

While both men and women can become depressed, the signs can be very different. Men may be more likely than women to be exhausted and irritable, avoid the things they used to enjoy, lose sleep, and use alcohol or drugs to cope. They also may become frustrated, discouraged, reckless, angry, and sometimes abusive. Some bury themselves in their work to avoid talking about their depression with family or friends.

STATISTICS

Ω Adult African Americans are 20 percent more likely to report serious psychological distress than adult Whites are.

Ω Adult African Americans living in poverty are two to three times more likely to report serious psychological distress than those not living in poverty.

Ω Among men aged 18–44 who had daily feelings of anxiety or depression, non-Hispanic Black and Hispanic men (26.4 percent) were less likely than non-Hispanic White men (45.4 percent) to have used mental health treatments.

Ω Suicide is the third leading cause of death for African American males ages 15 to 24.

Ω African American men ages 20 to 24 have the highest suicide rate among African Americans of all ages, male and female.

Ω African American teenagers are more likely to attempt suicide than are White teenagers.

Ω Young African Americans are much less likely than White youth to have used a mental health service in the year during which they seriously thought about or attempted suicide.

CAUSES OF DEPRESSION

Depression can have a combination of causes, including stress, negative thinking patterns, other illnesses, a family history of mental health issues, drug and alcohol abuse, brain chemistry, hormones, and surroundings and life experiences, including trauma or abuse. Mental health problems have nothing to do with laziness, weakness, or character flaws.

HOW TO MANAGE STRESS

Stress is often associated with depression. Sometimes, if not managed well, it can lead to symptoms of depression. Therefore, it is very important to learn how to manage stress on a regular basis. Examples of how you can manage stress:

Ω Stay in touch with people who can provide emotional and other support, including friends, family, and community or religious organizations.

Ω Get proper health care for existing or new health problems.

Ω Set priorities: Decide what must get done and what can wait, and learn to say no to new tasks if they are putting you into overload.

Ω Note what you have accomplished at the end of the day, not what you have been unable to do.

Ω Avoid dwelling on problems. If you can't do this on your own, seek help from a qualified mental health professional who can guide you.

Ω Exercise regularly—just 30 minutes per day of easy walking or other exercise can help boost your mood and reduce stress.

Ω Schedule regular times for healthy and relaxing activities.

Ω Recognize signs of your body's response to stress, such as difficulty sleeping, increased alcohol and other substance use, being easily angered, feeling depressed, and having low energy.

Ω Explore stress coping programs, which may incorporate meditation, yoga, tai chi, or other gentle exercises.

HOW TO ADDRESS DEPRESSION

A doctor or other health professional may be able to diagnose and treat depression or refer you to other mental health services, such as counseling or talk therapy. Try to see someone as soon as possible; research shows that getting treatment sooner rather than later can relieve symptoms more quickly and reduce how long treatment is needed. Individual, family, or employer health insurance can help cover costs, and community or student health centers can provide basic

health care services at little or no cost. There are also other steps you can take:

- Ω Spend time with other people. Try not to isolate yourself, and let others help you.
- Ω Break up large tasks into small ones, and do what you can as you can; try not to do too many things at once.
- Ω Do not make important decisions until you feel better; talk about decisions with others whom you trust and who know you well.
- Ω Engage in mild physical activity or exercise.
- Ω Participate in activities that you used to enjoy.

- Ω Expect your mood to improve gradually with treatment. Often, sleep and appetite will begin to improve before your depressed mood lifts. Remember that positive thinking will replace negative thoughts over time.

Of course, if you or someone you know is in crisis, get help quickly:

- Ω Call your doctor.
- Ω Call 911 for emergency services.
- Ω Go to the nearest hospital emergency room.
- Ω Call the toll-free, 24-hour hotline of the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255); TTY: 1-800-799-4TTY (1-800-799-4889).

National Institute of Mental Health. (2012). Depression and college students. Bethesda, MD: National Institutes of Health. Retrieved from <http://www.nimh.nih.gov/health/publications/depression-and-college-students-new/index.shtml>, which specifically cites American College Health Association. American College Health Association-National College Health Assessment II: Reference Group Executive Summary Fall 2011. Hanover, MD: American College Health Association; 2012.

National Institute of Mental Health. (n.d.). Depression. Retrieved from <https://www.nimh.nih.gov/health/topics/depression/index.shtml>

Mental Health America. (n.d.). African-American communities and mental health. Retrieved from <http://www.mentalhealthamerica.net/african-american-mental-health>

Office on Minority Health. (2014). Mental health and African Americans. Retrieved from <http://minorityhealth.hhs.gov/omh/browse.aspx?lvl=4&lvlid=24>

Suicide Prevention Resource Center. (n.d.). Suicide among racial/ethnic populations in the U.S. Retrieved from <http://www.sprc.org/sites/sprc.org/files/library/Blacks%20Sheet%20August%2028%202013%20Final.pdf>

Lowe, F. H. (2014, March 4). Young Black men suffer from high rates of depression. Retrieved from http://www.finalcall.com/artman/publish/National_News_2/article_101252.shtml. Cites CDC for suicide rate for Black men ages 20–24: 18.8 per 100,000.

Centers for Disease Control and Prevention. (June 2015). NCHS Data Brief: Racial and Ethnic Disparities in Men's Use of Mental Health Treatments. Retrieved from <http://www.cdc.gov/nchs/data/databriefs/db206.htm>

<http://www.nimhd.nih.gov/byomm>
<http://www.opf.org/byomm>